

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Americans for Responsible Solutions-PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00540443 </div>	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y . . . / . . . / </div>	
Full Name of Payee The Campaign Group Inc.		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2014 </div>	
Mailing Address 1600 Locust Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2750.00 </div>	
City State Zip Code Philadelphia PA 19103		Transaction ID : D558737 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2014 </div>	
Purpose of Expenditure Digital advertising - Estimate		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">.</div>	
Name of Federal Candidate JEANNE SHAHEEN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 210445.27 </div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014 </div>	
Mailing Address 3050 K St NW Ste 100		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3000.00 </div>	
City State Zip Code Washington DC 20007-5161		Transaction ID : D558738 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014 </div>	
Purpose of Expenditure Radio advertising - Estimate		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">.</div>	
Name of Federal Candidate MARK ROBERT WARNER		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 41000.00 </div>		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 5750.00 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
(c) TOTAL Independent Expenditures..... ▶		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Vickie Winpisinger, Assistant Treasurer</u>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014 </div>	
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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NAME OF COMMITTEE (In Full) Americans for Responsible Solutions-PAC		FEC IDENTIFICATION NUMBER ▼ C C00540443	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2014		
Mailing Address 3050 K St NW Ste 100			Amount 38000.00		
City Washington	State DC	Zip Code 20007-5161	Transaction ID : D558739		
Purpose of Expenditure Radio advertising - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2014		
Name of Federal Candidate MARK ROBERT WARNER		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought 41000.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2014		
Mailing Address 3050 K St NW Ste 100			Amount 3000.00		
City Washington	State DC	Zip Code 20007-5161	Transaction ID : D558740		
Purpose of Expenditure Radio advertising - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2014		
Name of Federal Candidate GARY PETERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought 15350.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	41000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Vickie Winpisinger, Assistant Treasurer

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Date

MM / DD / YYYY
10 / 30 / 2014

Signature

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PAGE	3	OF	3
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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 30 / 2014	
Mailing Address 3050 K St NW Ste 100		Amount 12350.00	
City Washington	State DC	Zip Code 20007-5161	Transaction ID : D558741
Purpose of Expenditure Radio advertising - Estimate		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 10 / 30 / 2014
Name of Federal Candidate GARY PETERS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		15350.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12350.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	59100.00

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Vickie Winpisinger, Assistant Treasurer

[Electronically Filed]

Date

MM / DD / YYYY
10 / 30 / 2014

Signature